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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the application of)	
)	
DE LA GUARDIA)	Group Art Unit: 3754
)	
Application No.: 10/646,074)	Examiner: BOMBERG, KENNETH
)	
Filed: 08/22/2003)	Attorney Docket No.:
)	510.152B
For: PRESSURIZING DEVICE FOR)	
ATTACHMENT TO FLUID)	
CONTAINERS)	

CERTIFICATE OF FACSIMILE TRANSMISSION

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Signed: Toni Sampson

Toni Sampson

RESPONSE TO ELECTION OF SPECIES REQUIREMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Sir:

Applicant's undersigned attorney hereby requests a one (1) month extension of time within which to file the present response. The Commissioner of Patents is hereby authorized to charge the \$120.00 fee for such extension, and any additional fees that may be required in connection with the filing of this paper, to Deposit Account No. 03-2270.

In response to the Office Actions mailed November 22, 2004 and August 16, 2004, Applicant hereby elects the species of Figs. 9-14. It is respectfully submitted that

510.152B

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PTO/SB/21 (09-04)

Approved for use through 07/31/2006, OMB 0651-0031
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/646,074	
	Filing Date	August 22, 2003	
	First Named Inventor	Mario de la Guardia	
	Art Unit	3754	
	Examiner Name	Kenneth Bomberg	
Total Number of Pages in This Submission	3	Attorney Docket Number	510.152B

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
Remarks _____		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	The Clorox Company	
Signature	<i>Monica Winghart</i>	
Printed name	Monica Winghart	
Date	1-11-05	Reg. No. 46,790

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